

# AUTHORIZATION AND CERTIFICATION FOR INDIVIDUAL INACTIVE DUTY TRAINING

## PART 1 - AUTHORIZATION

<b>Organization:</b> Joint Force Headquarters	<b>Location of Training:</b>
<b>Date(s) Duty to be Performed:</b>	<b>Time of Duty:</b>

Printed Name, SSN, and Rank of Individual(s)

Under the provisions of NGR(AR) 350-1, the individual(s) listed above is/are directed to perform duty in uniform, during the date(s) and time indicated. The nature of duty or training will be:

☐ **Authorization for scheduled or rescheduled drills. Drill dates:** \_\_\_\_\_  
(Regularly scheduled drill dates go here)

# of periods: 1 ☐ 2 ☐ 3 ☐ 4 ☐

☐ **Authorization for additional training (RMA) or (ATA) :** \_\_\_\_\_

Describe duty to be performed here:

**Approved by:** \_\_\_\_\_  
(Printed name)  
(Directorate level)

<b>Name, Rank, Title of Authorizing Officer</b> CHRISTOPHER J. PATTERSON, MAJ, Commanding	<b>Signature</b>	<b>Date</b>
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## PART II CERTIFICATION:

I certify that the individual(s) listed above performed the duty or training in uniform and during the date(s) and time indicated above in accordance with NGR(AR) 350-1. **Duty or training performed was as follows:**

<b>Name, Rank, Title of Certifying Official</b>	<b>Signature</b>	<b>Date</b>
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Instructions:

Organization: The unit the SOLDIER belongs to

Location of Training: Where the SOLDIER will perform the SUTA

Dates duty to be performed: actual days of duty

Time of duty: (must be at least 4 hrs per UTA performed)

Printed name, ssn and rank : can be a roster of names if they are all performing the same duty on the same days.

Authorization for scheduled or rescheduled drills. Drill dates: Regularly scheduled drill dates go here

Check the number of periods to be performed (4 hrs per period)

Authorization for additional training (RMA) or (ATA) : code 91 or 71 for RMA's

Describe duty: this must be filled out with a description of what the SOLDIER is doing

Approved by: must be signed by the directorate or their designee prior to the scheduled drill

**Turn in copy to Orderly Room NLT COB of Friday prior to the scheduled drill**

Authorizing officer: Leave blank (can only be signed by MAJ Patterson)

Certification: describe duty performed

Certifying signature must be the SOLDIERS supervisor who knows where and when the SOLDIER performed the duty.

**Turn in original to Orderly Room to be submitted for pay**